

2263

PLACE OF BIRTH
 County of Jpls BUREAU OF VITAL STATISTICS 151 State Index No. 5226
 District of Arizona ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 229
 Town of Miami Local Registrar's No. _____
 or _____
 City of _____ (No. _____ St. _____ Ward _____)

FULL NAME OF CHILD Enriquez Cabrera } Born } YES
 If child is not named, make Supplemental Report on blank obtainable from local registrar. } Alive } ~~NO~~

Sex of Child Male { Twin, Triplet or other } and { Number in order of birth } 1 Legitimate? Yes Date of Birth June 28 - 1917
 (Month) (Day) (Yr.)

FATHER
 Full Name Jose Cabrera
 Residence Miami - Arizona
 Color or Race Mex Age at last Birthday 26 (Years)
 Birthplace Pomito - Mexico
 Occupation Sailor

MOTHER
 Full Maiden Name Carmen Herrera
 Residence Miami - Arizona
 Color or Race Mex Age at last Birthday 17 (Years)
 Birthplace Pomito - Mexico
 Occupation Housewife

Number of child of this mother 1 Number of Children, of this mother, now living 1 Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on June 28 1917, at 1:57 P.M.

*When there is no attending physician or midwife, then the householder should make this return.

(Signature) Cyril M. Crow M.D.
 (Attending physician, midwife, householder,*)

Given or Christian name added from a supplemental report _____ 191____

Address Miami, Arizona

Filed July 24 1917

True Copy

Filed Aug 7 1917

LOCAL REGISTRAR.

COUNTY REGISTRAR.

COUNTY REGISTRAR.